



## STOP Annual Report Form Sexual Assault Nurse Examiner Programs

Contractor: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

E-mail Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Contract Number: \_\_\_\_\_

**Reporting Period:** *January 1 – December 31*

**Report Due Date:** *January 15*

- A. Indicate the staff and volunteer positions funded by this STOP project.** *(Include the person's name, title and full-time equivalent, i.e., 1 is a full time employee, .25 is a 1/4 time employee, .50 is a half time employee, etc.)*

Name	Title	Full-time Equivalent

- B. Indicate the number of active nurse examiners involved in this STOP funded project.**

\_\_\_\_\_ Active Nurse Examiners

- C. Indicate the number of nurse examiners recruited and trained through this STOP funded project.**

\_\_\_\_\_ Nurse Examiners Recruited

\_\_\_\_\_ Nurse Examiners Trained

- D. Indicate the number of adult sexual assault crimes reported to law enforcement in your agency's service area.**

\_\_\_\_\_ Adult Sexual Assault Crimes

- E. Indicate the average time between the arrival of the crime victim at the hospital or clinic and the arrival time of the nurse examiner and/or victim advocate. Include other information that may clarify the time reported.**

\_\_\_\_\_ **Hours on Average**

*Additional Information:*

- F. Indicate the number of adult sexual assault crime victims treated through the SANE program.**

\_\_\_\_\_ Total Number Served                      \_\_\_\_\_ Referrals from Law Enforcement

- G. Indicate how many of the crime victims served filed a police report.**

\_\_\_\_\_ Filed a Report at Time of Treatment                      \_\_\_\_\_ Did Not File a Report  
\_\_\_\_\_ File a Report at a Later Time                      \_\_\_\_\_ Unknown

- H. Indicate the time elapsed between the assault on the victim and her arrival at the hospital.**

\_\_\_\_\_ Less than 24 hours                      \_\_\_\_\_ 24 – 48 hours                      \_\_\_\_\_ 48 – 72 hours  
\_\_\_\_\_ Over 72 hours

- I. Indicate the efficacy rate in rape collection kits as evidenced by feedback from the crime lab and prosecutor.**

\_\_\_\_\_ %

- J. Indicate the number of cases successfully prosecuted as a result of the SANE program.**

\_\_\_\_\_ Total Cases Successfully Prosecuted

*For the following sections, please provide as much information as possible. Attach additional sheets if necessary.*

**K. Complete the following information as it relates to any special training received by staff or volunteers through this STOP project.**

[illegible]

**L. Complete the following information as it relates to any special training or public awareness presentations provided by your agency through this STOP project.**

[illegible]

- M. Describe efforts to promote coordinated efforts within the community to aid crime victims and address crimes targeting women. Include information regarding the meetings of formal task force units, committees, etc. Include any needs assessments, program evaluations, training efforts, new protocol, policies, procedures, etc.**
- N. Describe any notable activities conducted to improve the delivery of victim services. These activities need to be related specifically to the STOP funded project and/or coordination of the STOP project.**
- O. Describe any notable activities aimed at educating the community regarding crimes committed against women, public awareness, and/or prevention.**

**P. Include and/or attach anecdotal information and individual case histories illustrating how STOP funds have been used to assist crime victims.**

**Q. Identify any emerging issues or notable trends impacting crimes against women in your area.**

\_\_\_\_\_  
Project Director Date

\_\_\_\_\_  
Authorized Official Date

**Please Note:** This Annual Performance Report must be received by January 15<sup>th</sup> during the year immediately following the end of the contract period for the referenced contract. Failure to submit this Annual Performance Report by January 15<sup>th</sup> could result in the termination of any current funding awarded to this contractor.